

General

Title

Hepatitis C: percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C who are receiving antiviral treatment for whom quantitative hepatitis C virus (HCV) ribonucleic acid (RNA) testing was performed between 4 and 12 weeks after the initiation of antiviral treatment.

Source(s)

American Gastroenterological Association (AGA). Hepatitis C measures group overview. Bethesda (MD): American Gastroenterological Association (AGA); 2016 Jan. 17 p.

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Process

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C who are receiving antiviral treatment for whom quantitative hepatitis C virus (HCV) ribonucleic acid (RNA) testing was performed between 4 and 12 weeks after the initiation of antiviral treatment.

Rationale

Monitoring effectiveness of antiviral therapy is essential to effective treatment. An early virologic response (EVR), during the first 12 weeks of therapy, is a valuable clinical milestone.

Patients should be monitored during therapy to assess the response to treatment and for the occurrence of side effects. A reasonable schedule would be monthly visits during the first 12 weeks of treatment followed by visits at 8 to 12 week intervals thereafter until the end of therapy. At each visit the patient

should be questioned regarding the presence of side effects and depression. They should also be queried about adherence to treatment. Laboratory monitoring should include measurement of the complete blood count, serum creatinine and alanine aminotransferase (ALT) levels, and hepatitis C virus (HCV) ribonucleic acid (RNA) by a sensitive assay at weeks 4, 12, 24, 4 to 12 week intervals thereafter, the end of treatment, and 24 weeks after stopping treatment (Ghany et al., 2009).

Clinical Recommendation Statements:

HCV RNA should be tested by a highly sensitive quantitative assay at the initiation of or shortly before treatment and at week 12 of therapy (Ghany et al., 2009).

Patients (with genotype 1) without cirrhosis treated with boceprevir, peginterferon, and ribavirin, preceded by 4 weeks of lead-in peginterferon and ribavirin, whose HCV RNA level at weeks 8 and 24 is undetectable, may be considered for a shortened duration of treatment of 28 weeks in total (4 weeks lead-in with peginterferon and ribavirin followed by 24 weeks of triple therapy) (Ghany et al., 2011).

Patients (with genotype 1) without cirrhosis treated with telaprevir, peginterferon, and ribavirin, whose HCV RNA level at weeks 4 and 12 is undetectable should be considered for a shortened duration of therapy of 24 weeks (Ghany et al., 2011).

Evidence for Rationale

American Gastroenterological Association (AGA). Hepatitis C measures group overview. Bethesda (MD): American Gastroenterological Association (AGA); 2016 Jan. 17 p.

Ghany MG, Strader DB, Thomas DL, Seeff LB, American Association for the Study of Liver Diseases. Diagnosis, management, and treatment of hepatitis C: an update. Hepatology. 2009 Apr;49(4):1335-74. PubMed

Ghany MG, Nelson DR, Strader DB, Thomas DL, Seeff LB, American Association for Study of Liver Diseases. An update on treatment of genotype 1 chronic hepatitis C virus infection: 2011 practice guideline by the American Association for the Study of Liver Diseases. Hepatology. 2011 Oct;54(4):1433-44. [35 references] PubMed

Primary Health Components

Chronic hepatitis C virus (HCV); ribonucleic acid (RNA) testing; antiviral treatment

Denominator Description

Patients aged 18 years and older with a specific diagnosis of chronic hepatitis C with initiation of antiviral treatment before October of the measurement year (12 weeks before the end of the measurement period) (see the related "Denominator Inclusions/Exclusions" field)

Numerator Description

Patients for whom quantitative hepatitis C virus (HCV) ribonucleic acid (RNA) testing was performed at no greater than 12 weeks from the initiation of antiviral treatment (see the related "Numerator Inclusions/Exclusions" field)

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

Unspecified

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Ambulatory/Office-based Care

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Individual Clinicians or Public Health Professionals

Statement of Acceptable Minimum Sample Size

Specified

Target Population Age

Age greater than or equal to 18 years

Target Population Gender

Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Living with Illness

IOM Domain

Effectiveness

Data Collection for the Measure

Case Finding Period

Before October of the measurement year (12 weeks before the end of the measurement period)

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Clinical Condition

Encounter

Patient/Individual (Consumer) Characteristic

Therapeutic Intervention

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

Patients aged 18 years and older with a specific diagnosis of chronic hepatitis C with initiation of antiviral treatment before October of the measurement year (12 weeks before the end of the measurement period)

Denominator Criteria (Eligible Cases):

Patients aged greater than or equal to 18 years on date of encounter

AND

One of the following diagnosis codes indicating chronic hepatitis C (International Classification of Diseases, Tenth Revision, Clinical Modification [ICD-10-CM] codes): B18.2

AND

One of the specific Current Procedural Terminology (CPT) patient encounter codes (refer to the original measure documentation for specific CPT codes)

Exclusions

None

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Patients for whom quantitative hepatitis C virus (HCV) ribonucleic acid (RNA) testing was performed at no greater than 12 weeks* from the initiation of antiviral treatment

*4 to 12 Weeks after Initiation: Patients for whom testing was performed between 4 and 12 weeks from the initiation of antiviral treatment will meet the numerator for this measure, acknowledging that there may be different recommended follow-up testing based on the specific antiviral therapy used to treat a particular patient.

Exclusions

Hepatitis C quantitative RNA testing not performed between 4 and 12 weeks after the initiation of antiviral treatment for documented reason(s) (e.g., patients whose treatment was discontinued during the testing period prior to testing, other medical reasons, patient declined, other patient reasons)

AND

Patient receiving antiviral treatment for hepatitis C during the measurement period

OR

Clinician documented that patient is not an eligible candidate for quantitative RNA testing Patient not receiving antiviral treatment for hepatitis C

Numerator Search Strategy

Fixed time period or point in time

Data Source

Administrative clinical data

Registry data

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Identifying Information

Original Title

Measure #87: hepatitis C: hepatitis C virus (HCV) ribonucleic acid (RNA) testing between 4-12 weeks after initiation of treatment.

Measure Collection Name

Hepatitis C

Submitter

American Gastroenterological Association - Medical Specialty Society

Developer

American Gastroenterological Association - Medical Specialty Society

Funding Source(s)

Unspecified

Composition of the Group that Developed the Measure

Unspecified

Financial Disclosures/Other Potential Conflicts of Interest

Unspecified

Measure Initiative(s)

Physician Quality Reporting System

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2016 Jan

Measure Maintenance

Unspecified

Date of Next Anticipated Revision

2017

Measure Status

This is the current release of the measure.

This measure updates a previous version: American Gastroenterological Association Institute, Physician Consortium for Performance Improvement®. Hepatitis C physician performance measurement set. Chicago (IL): American Medical Association (AMA); 2010 Sep. 42 p.

Measure Availability

Source not available electronically.

For more information, conta	ct the American Gastroenterological Association (AGA) at 4930 Del Ray
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Web site: www.gastro.org	

NQMC Status

This NQMC summary was completed by ECRI Institute on February 27, 2009. The information was verified by the measure developer on May 21, 2009.

This NQMC summary was retrofitted into the new template on June 6, 2011.

This NQMC summary was edited by ECRI Institute on April 27, 2012.

Stewardship for this measure was transferred from the PCPI to the AGA. AGA informed NQMC that this measure was updated. This NQMC summary was updated by ECRI Institute on March 14, 2016. The information was verified by the measure developer on March 29, 2016.

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Production

Source(s)

American Gastroenterological Association (AGA). Hepatitis C measures group overview. Bethesda (MD): American Gastroenterological Association (AGA); 2016 Jan. 17 p.

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